## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

M4065,0151

CLAIMS AS FILED - PART I (Column 1)					(Column 2) SMALL ENTITY TYPE TYPE			OTHER THAN OR SMALL ENTITY				
TOTAL CLAIMS			54		2.40 × 26.00 (8.4)		Γ	RATE	FEE		RATE	FEE
FO	R	4	NUMBER FILED		NUMBER EXTRA		E	SASIC FEE	355.00	OR	BASIC FEE	710.00
το	TAL CHARGEAE	BLE CLAIMS	5 4minus 20=		. 34			X\$ 9=		OR	X\$18=	612
IND	EPENDENT CL	AIMS	nus 3 =	•			X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT							ŀ	+135=	-	OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL		OR	TOTAL	1342
CLAIMS AS AMENDED - PART II								•			OTHER	
	(Column 1) (Column 2) (Column 3)					(Column 3)		SMALL E	NTITY	OR	SMALL	
AMENDMENT A	The second	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	. 54	Minus		54	= —		X\$ 9=		OR	X\$18=	
AME	Independent	• 3	Minus	*** 3		=		X40=		OR	X80=	
	FIRST PHESE	NTATION OF MU	JUITPLE DE	PENDEN	CLAIM			+135=		OR	+270=	
							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	-	ODII. FEE		•	A0011.1 EE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X40=		OR	X80=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	TCLAIM		]	+135=		OR	+270=	
							L	TOTAL		OR	TOTAL	
		0		<b>10</b> I	0)	(O - 1 0)		ADDIT. FEE		] •	ADDIT. FEE	<u> </u>
		(Column 1) CLAIMS			mn 2) HEST	(Column 3)	1 6		.50	1		1 4001
AMENDMENT C		REMAINING AFTER AMENDMENT		NUN PREV	MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIC.NAL FEE
ΣQ	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┧╽		<b></b>	1		<del> </del>
	****	# 14   6 - 4   4 - 6 - 4	iho onterie cel	uma C wiii	ta "O" in a	olumn 3		+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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Effective October 1, 2001

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS							Γ	RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		E	BASIC FEE	370.00	OR	BASIC FEE	740.00	
TO	TAL CHARGE	ABLE CLAIMS	mi	nus 20=	*			X\$ 9=		OR	X\$18=		
INI	DEPENDENT C	LAIMS	rr	inus 3 =	*			X42=		OR	X84=		
M	JLTIPLE DEPEI	NDENT CLAIM P	RESENT					+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	L	TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II					(Column 3)		SMALL E	ENTITY	OR	OTHER THAN SMALL ENTITY			
AMENDMENTA		(Column 1) CLAIMS REMAINING		(Colur HIGH NUM	EST	(Column 3) PRESENT	Γ		ADDI-			ADDI-	
		* AFTER AMENDMENT		PREVIO PAID		EXTRA	_	RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	* 51	Minus	** =	24	=		X\$ 9=		OR	X\$18=		
	Independent	* 3	Minus	***	· CL A114	=		X42=		OR	X84=		
_	FIRST PRESE	ENTATION OF MI	JUITPLE DE	PENDENI	CLAIM			+140=		OR	+280=		
							<b>L</b> .	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colur	nn 2)	(Column 3)		DOTT. TEE					
AMENDMENT B		CLAIMS REMAINING AFTER AMENŌMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		= -		X42=		OR	X84=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DE	PENDENT	CLAIM			+140=		OR	+280=		
							<b>L</b>	TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE	·	
		(Column 1)	-	(Colur	nn 2)	(Column 3)		JOH . 1 EE E					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		z		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X42=		OR	X84=		
_	FIRST PRESE	NTATION OF MU	JLTIPLE DE	PENDENT	CLAIM		-	+140=		OR	+280=		
. • (	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OB.	TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter *20."  ***ADDIT. FEEOH ADDIT. FEE													